Ancestral File (TM) - ver G410

PEDIGREE CHART

28 AUG 1992 Chart 1

No. 1 on this chart is the same as no. _____ on chart no. _____

AFN=Ancestral File Number

1 Howard Russell JENSEN
AFN: 3B4B-P6
BORN: 20 Jun 1931
Springville,, UT
MAR.:
DIED: 15 Oct 1954
Salt Lake City,, UT
SPOUSE
Joan BIRD
AFN: 6VPH-HS
BORN: LIVING
DIED:

2 Howard Christian JENSEN
AFN: 3B4B-RJ
BORN: LIVING
MAR.:
DIED:

3 Audra MORGAN
AFN: 3B4B-SP
BORN: LIVING
DIED:

4 John Nephi JENSEN
AFN: 3B4B-TV
BORN: 12 Mar 1872
, Denmark
MAR.: 19 Jun 1900
DIED: 5 Apr 1912
Springville, UT

5 Minnie Hannah CHERRINGTON
AFN: 1F09-PR
BORN: 10 Feb 1878
Springville, UT
DIED: 25 Feb 1959
Los Angeles, CA

6 Joseph Charles MORGAN
AFN: 1S7J-ZL
BORN: 23 Jul 1875
Salt Lake City, UT
MAR.: 8 Oct 1902
Provo, UT
DIED: 5 Feb 1936
Payson, UT

7 Leah WILSON
AFN: 3B4B-V2
BORN: 5 Sep 1885
Payson, UT
DIED: 29 Jan 1971
Payson, UT

8 Christian JENSEN
AFN: 3B4B-W7
BORN: 31 Oct 1839
Copenhagem, Denmark
MAR.:
DIED: 27 Nov 1919
Spanish Fork, Utah, UT

9 Mary Ann CHRISTIANSEN
AFN: 3B4B-XD
BORN: 4 Nov 1845 (To 1850)
Copenhagen, Denmari
DIED: 1 Dec 1935
Spanish Fork, Utah, UT

10 Joseph CHERRINGTON
AFN: 1F09-GK
BORN: 11 Feb 1853
West Bromwich,S, Eng.
MAR.: 1 Feb 1877
Springville, Utah, UT
DIED: 2 Mar 1917
Springville, Utah, UT

11 Prudence STRAW
AFN: 1F09-HQ
BORN: 26 Nov 1855
Dukinfield, Cheshire, Eng
DIED: 17 May 1918
Springville, Utah, UT

12 Joseph Rehoboam MORGAN
AFN: 1S7J-5G
BORN: 26 Apr 1835
L,, England
MAR.: 6 May 1862
Cheltenham,G, England
DIED: 18 Nov 1920
Salt Lake City,S, UT

13 Mary Margaret Jane TURNER
AFN: 1S7J-6M
BORN: 15 Oct 1841
Presbury,G, England
DIED: 29 Oct 1923
Salt Lake City,S, UT

14 David WILSON
AFN: 1QHX-JP
BORN: 1 Sep 1857
Payson, Utah, UT
MAR.: 2 May 1883
Salt Lake City,S, UT
DIED: 3 Sep 1893
Payson, Utah, UT

15 Lucie Lovisa MARSH
AFN: 2D22-Q5
BORN: 2 Feb 1861
Payson, Utah, UT
DIED: 15 Jun 1925
Payson, Utah, UT

16
AFN:
BORN:

17
AFN:
BORN:

18
AFN:
BORN:

19
AFN:
BORN:

20 John CHERRINGTON
AFN: 1HF1-J9
BORN: 14 Nov 1821

21 Sarah BELSHER
AFN: 1HF1-KG
BORN: 10 Sep 1823

22 James STRAW
AFN: 1KD2-FX
BORN: 18 Dec 1832

23 Hannah HILL
AFN: 1KD2-G4
BORN: 9 Jul 1833

24 Samuel MORGAN
AFN: 1S7J-95
BORN: 18 Oct 1811

25 Elizabeth BEDDIS
AFN: 1S7J-BB
BORN: 19 Feb 1811

26 James Moses TURNER
AFN: 1S7J-CH
BORN: 9 Mar 1817

27 Maria SIMMONS
AFN: 1S7J-DN
BORN: 21 Nov 1813

28 David Carlton WILSON
AFN: 1QHW-XM
BORN: 26 Feb 1831

29 Rachel P LOVELESS
AFN: 1BVR-B9
BORN: 15 Feb 1841

30 Cyprian MARSH
AFN: 2D22-1J
BORN: 16 Jul 1813

31 Clarissa DAVIS
AFN: 2D22-2P
BORN: 1 Jul 1822

ELIGIBLE CHECKING ACCOUNT CUSTOMER: 02-023B

R. RAYM[illegible] MD*
SHIRLE[illegible] GREEN*
45 S. MAIN
HEBER CITY, UT 84032-1851

(For your protection, your account number has been scrambled by computer.)

DJRFDHKRFDG

CUSTOMER INFORMATION — PLEASE PRINT 0887414

Date of Birth ___/___/___ (Mo. Day Yr.) ☐ Male ☐ Female

Your beneficiary for the no-cost coverage is automatically your spouse (or your estate, if you are not married).

DEPENDENT INFORMATION — IF FAMILY COVERAGE DESIRED

Spouse Name ________ Birth Date __/__/__

Child Name ________ Birth Date __/__/__

Child Name ________ Birth Date __/__/__

(Check one box only)

Customer Only ☐ ☐ ☐

Family Plan ☐ ☐ ☐

Your Beneficiary ________

Beneficiary's Date of Birth __/__/__ Relationship ________

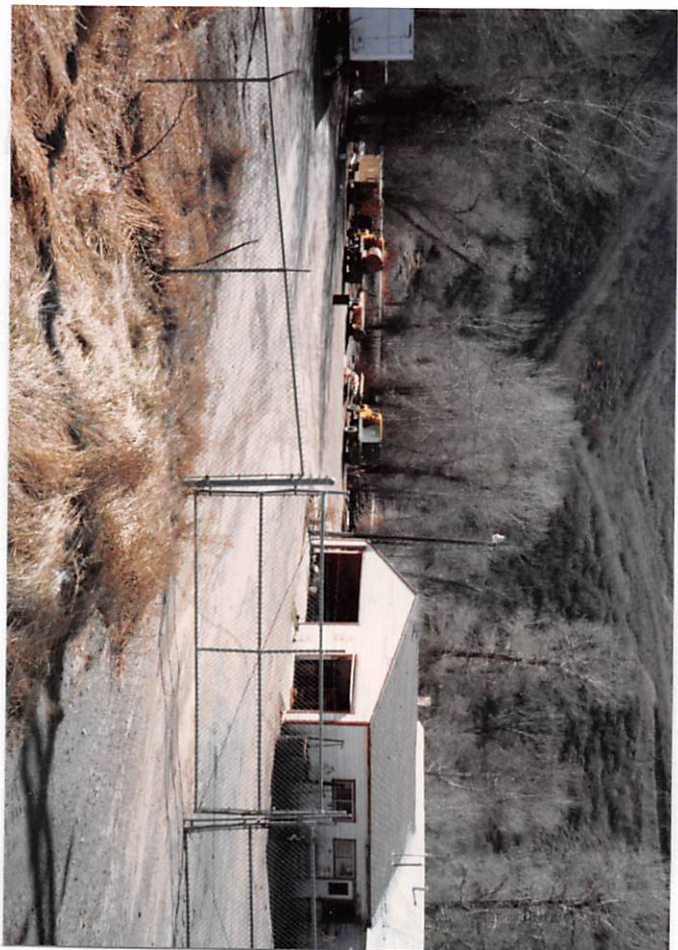
I hereby enroll for the Group Accidental Death Plan underwritten by Monumental Life Insurance Company ("Company"). I understand that to enroll for the insurance being offered, I must currently be a customer of First Security Bank. I further understand that to continue my $1,000.00 coverage, I must maintain an account with First Security Bank.

If I selected additional coverage above, I authorize the Company to initiate deductions from my First Security Bank checking account for the monthly premium due. This authority is to remain in effect until I cancel it by written notification to the Company at least 30 days in advance of the intended date of cancellation. (Any excess premiums which may accrue after termination of this authority will be refunded.) I understand that the insurance enrolled for will become effective on the Effective Date shown on the Certificate of Insurance provided the first premium is paid.

X ________ Signature of Customer __/__/__ Date

058 4634 **IMPORTANT: ENROLLMENT FORM SHOULD BE MAILED BY ~~OCTOBER 5, 1992~~** OCTOBER 15, 1992

FSB2bcfD

*JOINT ACCOUNT CUSTOMERS: THE CUSTOMER WHO SIGNS THE ENROLLMENT FORM WILL RECEIVE THE COMPLIMENTARY COVERAGE.

Dance at Jordanell
Wed., May 30th

Music by

Neil Williams Smilers

25 May, 1928

Jordanelle East Hill
High-line canal

"Jordanelle Resort" & Grove
Owned and operated by
George Borlan Jordan and
Wife Emma Davis Jordan

Get Kimball
art center
pictures

Pict. of Geo &
Emma Jordan

Get P.C Kimball
art center Pict

See Mae
Cummings